

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF TEXAS

Case number (if known): _____

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this is an
amended filing

Official Form 101**Voluntary Petition for Individuals Filing for Bankruptcy****12/17**

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**About Debtor 1:****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Michael

First Name

Adam

Middle Name

Wagner

Last Name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):**Elise**

First Name

Rose

Middle Name

Wagner

Last Name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First Name

First Name

Middle Name

Middle Name

Last Name

Last Name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)xxx - xx - 9 5 6 9

OR

9xx - xx - _____

xxx - xx - 1 7 6 9

OR

9xx - xx - _____

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

About Debtor 1:

I have not used any business names or EINs.

Business name _____

Business name _____

Business name _____

EIN _____

EIN _____

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business names or EINs.

Business name _____

Business name _____

Business name _____

EIN _____

EIN _____

5. Where you live**2401 33rd Avenue North**

Number Street _____

Texas City TX 77590

City State ZIP Code _____

Galveston

County _____

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street _____

P.O. Box _____

City State ZIP Code _____

Number Street _____

City State ZIP Code _____

County _____

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street _____

P.O. Box _____

City State ZIP Code _____

6. Why you are choosing this district to file for bankruptcy**Check one:**

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7

Chapter 11

Chapter 12

Chapter 13

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

8. How you will pay the fee

I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No
 Yes.

District _____ When _____ Case number _____
 MM / DD / YYYY

District _____ When _____ Case number _____
 MM / DD / YYYY

District _____ When _____ Case number _____
 MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No
 Yes.

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
 MM / DD / YYYY if known

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
 MM / DD / YYYY if known

11. Do you rent your residence?

No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.
 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.
 Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City _____ State _____ ZIP Code _____

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

No
 Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number Street

City _____ State _____ ZIP Code _____

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.
 Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer or business debts.

17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

No. I am not filing under Chapter 7. Go to line 18.
 Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No
 Yes

18. How many creditors do you estimate that you owe?

<input type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input checked="" type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Michael Adam Wagner

Michael Adam Wagner, Debtor 1

Executed on **11/09/2018**

MM / DD / YYYY

X /s/ Elise Rose Wagner

Elise Rose Wagner, Debtor 2

Executed on **11/09/2018**

MM / DD / YYYY

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X /s/ Dennis R. Boren

Signature of Attorney for Debtor

Date **11/09/2018**

MM / DD / YYYY

Dennis R. Boren

Printed name

Dennis R. Boren, Attorney

Firm Name

2100 S. Polk

Number Street

Amarillo

City

TX

State

79109

ZIP Code

Contact phone **(806) 206-8180**Email address **dborenlaw@gmail.com**

02665500

Bar number

TX

State

Fill in this information to identify your case and this filing:

Debtor 1	Michael	Adam	Wagner
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Elise	Rose	Wagner
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			<input type="checkbox"/> Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... → \$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1.

Make: Chevrolet

Who has an interest in the property?

Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$5,000.00

Current value of the portion you own?

\$5,000.00

Other information:

2005 Chevrolet Tahoe

Check if this is community property
(see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... → \$5,000.00

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No

Yes. Describe..... **See continuation page(s).**

_____ **\$1,760.00**

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe..... **See continuation page(s).**

_____ **\$446.00**

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe..... **See continuation page(s).**

_____ **\$655.00**

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe..... **See continuation page(s).**

_____ **\$500.00**

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe..... **See continuation page(s).**

_____ **\$260.00**

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe..... **See continuation page(s).**

_____ **\$120.00**

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....

_____ **\$3,741.00**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No
 Yes..... Cash: **\$25.00**

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No
 Yes..... Institution name:

17.1. Checking account:	Texas First Bank (Checking 10209989)	\$15.42
17.2. Other financial account:	Amarillo National Bank (Business 34000577)	\$0.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No
 Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No
 Yes. Give specific information about them..... Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No
 Yes. Give specific information about them..... Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No
 Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan: **retirement** **\$0.24**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.....

Institution name or individual:

Security deposit on rental unit: **Security deposit on rent house**

\$1,400.00

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them

Money or property owed to you?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: _____

State: _____

Local: _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information _____

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy

and list its value..... Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

No

Yes. Give specific information _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Describe each claim.....

35. Any financial assets you did not already list

No

Yes. Give specific information _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

→ **\$1,440.66**

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

Yes. Go to line 38.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

No

Yes. Describe..

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe.. **See continuation page(s).**

\$50.00

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No
 Yes. Describe..

41. Inventory

No
 Yes. Describe..

42. Interests in partnerships or joint ventures

No
 Yes. Describe..... Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations

No
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
 No
 Yes. Describe.....

44. Any business-related property you did not already list

No
 Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →

\$50.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No
 Yes....

48. Crops--either growing or harvested

No
 Yes. Give specific information.....

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No
 Yes....

50. Farm and fishing supplies, chemicals, and feed

No
 Yes....

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

51. Any farm- and commercial fishing-related property you did not already list

No
 Yes. Give specific information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... → \$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → \$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... → \$0.00

56. Part 2: Total vehicles, line 5 \$5,000.00

57. Part 3: Total personal and household items, line 15 \$3,741.00

58. Part 4: Total financial assets, line 36 \$1,440.66

59. Part 5: Total business-related property, line 45 \$50.00

60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

61. Part 7: Total other property not listed, line 54 \$0.00

62. Total personal property. Add lines 56 through 61..... \$10,231.66 Copy personal property total → \$10,231.66

63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$10,231.66

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

6. Household goods and furnishings (details):

1 Sofa	\$100.00
1 Loveseat	\$50.00
Sansui flatscreen	\$500.00
Visio flatscreen	\$100.00
Sceptre flatscreen	\$20.00
Sceptre flatscreen	\$20.00
1 DVD PLAYER	\$5.00
PERSONAL COMPUTER	\$20.00
VIDEO GAME SYSTEM	\$150.00
KITCHEN TABLE	\$10.00
REFRIGERATOR / FREEZER	\$75.00
MICROWAVE	\$10.00
WASHING MACHINE	\$75.00
CLOTHES DRYER	\$75.00
DISHES / FLATWARE	\$25.00
POTS / PANS / COOKWARE	\$10.00
5 BED	\$200.00
DRESSER(S) / NIGHTSTAND(S)	\$100.00
LAMPS / ACCESSORIES	\$15.00
CELLULAR TELEPHONES	\$200.00

8. Collectibles of value (details):

Encyclopedias, religious, education, childrens	\$60.00
Frames	\$10.00
Miscellaneous decor	\$200.00
Children's, romance, horror, comedy	\$75.00
Children's	\$1.00
Model cars, comics, toys	\$100.00

9. Equipment for sports and hobbies (details):

1 handgun, 1 rifle, 2 shotguns	\$330.00
4 wheeler (child size)	\$300.00
Sewing machine	\$25.00

11. Clothes (details):

Clothing / Wearing Apparel for 2 adult(s)	\$200.00
-------------------------------------------	----------

Debtor 1 Michael Adam Wagner
 Debtor 2 Elise Rose Wagner Case number (if known) _____

Clothing / Wearing Apparel for 3 children	\$300.00
12. Jewelry (details):	
Men silver plated, women's 1karat diamond	\$150.00
Husband and wife wedding jewelry	\$100.00
Costume jewelry	\$10.00
13. Non-farm animals (details):	
Shi tzu	\$100.00
Boxer/collie/lab mix	\$20.00
39. Office equipment, furnishings, and supplies (details):	
Desktop computer	\$20.00
Scanner/printer/fax machine	\$30.00

Fill in this information to identify your case:

Debtor 1	Michael	Adam	Wagner
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Elise	Rose	Wagner
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
--------------------------------------------------------------------------------------------	--------------------------------------	-----------------------------------	------------------------------------

Brief description: 2005 Chevrolet Tahoe (approx. 168,000 miles)	<u>\$5,000.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
---------------------------------------------------------------------------	-------------------	-----------------------------------------------------------------------------------------------------------------------------------------------	------------------------------

Line from *Schedule A/B*: 3.1

Brief description: 1 Sofa	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
-------------------------------------	-----------------	-------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------

Line from *Schedule A/B*: 6

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: 1 Loveseat	<u>\$50.00</u>	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Sansui flatscreen	<u>\$500.00</u>	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Visio flatscreen	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Sceptre flatscreen	<u>\$20.00</u>	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Sceptre flatscreen	<u>\$20.00</u>	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: 1 DVD PLAYER	<u>\$5.00</u>	<input checked="" type="checkbox"/> \$5.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: PERSONAL COMPUTER	<u>\$20.00</u>	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: VIDEO GAME SYSTEM	<u>\$150.00</u>	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: KITCHEN TABLE	<u>\$10.00</u>	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: REFRIGERATOR / FREEZER	<u>\$75.00</u>	<input checked="" type="checkbox"/> \$75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: MICROWAVE	<u>\$10.00</u>	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: WASHING MACHINE	<u>\$75.00</u>	<input checked="" type="checkbox"/> \$75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: CLOTHES DRYER	<u>\$75.00</u>	<input checked="" type="checkbox"/> \$75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: DISHES / FLATWARE	<u>\$25.00</u>	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: POTS / PANS / COOKWARE	<u>\$10.00</u>	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: 5 BED	<u>\$200.00</u>	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: DRESSER(S) / NIGHTSTAND(S)	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: LAMPS / ACCESSORIES	<u>\$15.00</u>	<input checked="" type="checkbox"/> \$15.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: CELLULAR TELEPHONES	<u>\$200.00</u>	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: Encyclopedias, religious, education, childrens	<u>\$60.00</u>	<input checked="" type="checkbox"/> \$60.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: Frames	<u>\$10.00</u>	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: Miscellaneous decor	<u>\$200.00</u>	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: Children's, romance, horror, comedy	<u>\$75.00</u>	<input checked="" type="checkbox"/> \$75.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: Children's	<u>\$1.00</u>	<input checked="" type="checkbox"/> \$1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: Model cars, comics, toys	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>8</u>			
Brief description: 1 handgun, 1 rifle, 2 shotguns	<u>\$330.00</u>	<input checked="" type="checkbox"/> \$330.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>9</u>			
Brief description: 4 wheeler (child size)	<u>\$300.00</u>	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>9</u>			

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: Sewing machine	<u>\$25.00</u>	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>9</u>			
Brief description: Clothing / Wearing Apparel for 2 adult(s)	<u>\$200.00</u>	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: Clothing / Wearing Apparel for 3 children	<u>\$300.00</u>	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: Men silver plated, women's 1karat diamond	<u>\$150.00</u>	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Line from <i>Schedule A/B</i> : <u>12</u>			
Brief description: Husband and wife wedding jewelry	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Line from <i>Schedule A/B</i> : <u>12</u>			
Brief description: Costume jewelry	<u>\$10.00</u>	<input checked="" type="checkbox"/> \$10.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Line from <i>Schedule A/B</i> : <u>12</u>			
Brief description: Shi tzu	<u>\$100.00</u>	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>13</u>			
Brief description: Boxer/collie/lab mix	<u>\$20.00</u>	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>13</u>			
Brief description: Cash on Hand	<u>\$25.00</u>	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>16</u>			

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption</i>
Brief description: Amarillo National Bank (Business 34000577)	<u>\$0.00</u>	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>17.2</u>			
Brief description: Texas First Bank (Checking 10209989)	<u>\$15.42</u>	<input checked="" type="checkbox"/> \$15.42 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>17.1</u>			
Brief description: retirement	<u>\$0.24</u>	<input checked="" type="checkbox"/> \$0.24 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)
Line from <i>Schedule A/B</i> : <u>21</u>			
Brief description: Security deposit on rent house	<u>\$1,400.00</u>	<input checked="" type="checkbox"/> \$1,400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>22</u>			
Brief description: Desktop computer	<u>\$20.00</u>	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>39</u>			
Brief description: Scanner/printer/fax machine	<u>\$30.00</u>	<input checked="" type="checkbox"/> \$30.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Line from <i>Schedule A/B</i> : <u>39</u>			

Fill in this information to identify your case:

Debtor 1	Michael First Name	Adam Middle Name	Wagner Last Name
Debtor 2 (Spouse, if filing)	Elise First Name	Rose Middle Name	Wagner Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known)			

Check if this is an amended filing

Official Form 106D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

<i>Column A</i> Amount of claim Do not deduct the value of collateral	<i>Column B</i> Value of collateral that supports this claim	<i>Column C</i> Unsecured portion If any
------------------------------------------------------------------------------------	------------------------------------------------------------------------	-------------------------------------------------------

2.1	Describe the property that secures the claim:	\$5,827.00	\$5,000.00	\$827.00
Cross Pointe Auto.. Creditor's name 2501 S Georgia Number Street	2005 Chevrolet Tahoe (approx. 168,000 miles)			

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset)

Automobile

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim relates to a community debt

Date debt was incurred 06/2018 Last 4 digits of account number 6 5 0 A

Add the dollar value of your entries in Column A on this page. Write that number here:

\$5,827.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$5,827.00

Fill in this information to identify your case:

Debtor 1	Michael	Adam	Wagner
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Elise	Rose	Wagner
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			<input type="checkbox"/> Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority amount	Nonpriority amount
2.1	\$4,081.00	\$4,081.00

Attorney General/Child Support Div..

Priority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 12017

Last 4 digits of account number 4 1 3 4When was the debt incurred? 08/18/2013

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Austin TX 78711

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of PRIORITY unsecured claim:

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 1: Your PRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.2	\$853.37	\$853.37	\$0.00
IRS Priority Creditor's Name Centralized Insolvency Operation Number Street Po Box 21126	Last 4 digits of account number 9 5 6 9	When was the debt incurred? 2018	
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of PRIORITY unsecured claim:</p> <p><input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify</p>			
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.3	\$4,081.00	\$4,081.00	\$0.00
Tabitha Hines Priority Creditor's Name 27190 E 123rd Pl Number Street	Last 4 digits of account number _____	When was the debt incurred? _____	
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of PRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify</p>			
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.4	\$823.54	\$823.54	\$0.00
Texas Workforce Commission Priority Creditor's Name 101 E 15th St, Rm 370 Number Street	Last 4 digits of account number 9 5 6 9	When was the debt incurred? 2016	
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of PRIORITY unsecured claim:</p> <p><input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify</p>			
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

4.1	Aaron's Sales & Lease.. Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 100039	Last 4 digits of account number <u>5</u> <u>3</u> <u>9</u> <u>5</u> When was the debt incurred? <u>04/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$674.00
Kennesaw GA 30156 City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Lease	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
4.2 Aaron's Sales & Lease.. Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 100039		Last 4 digits of account number <u>5</u> <u>3</u> <u>9</u> <u>5</u> When was the debt incurred? <u>04/2015</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Kennesaw GA 30156 City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Lease	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3 **\$1,200.80**

ACTM.

Nonpriority Creditor's Name

PO Box 1280

Number Street

Last 4 digits of account number **5 0 0 0**When was the debt incurred? **5/1/2018-5/1/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **PA** State **19456** ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

4.4 **\$492.22**

Amarillo National Bank.

Nonpriority Creditor's Name

PO Box 1

Number Street

Last 4 digits of account number **0 4 7 9**When was the debt incurred? **3/14/2018-3/14/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **TX** State **79105** ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

4.5 **\$15,557.43**

Amarillo National Bank.

Nonpriority Creditor's Name

PO Box 1

Number Street

Last 4 digits of account number **5 3 7 8**When was the debt incurred? **12/12/2016-7/24/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **TX** State **79105** ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.6	Amarillo National Bank. Nonpriority Creditor's Name PO Box 1 Number Street Amarillo TX 79105 City State ZIP Code	\$4,158.50
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		
<p>Last 4 digits of account number <u>1 8 8 8</u></p> <p>When was the debt incurred? <u>1/10/2017-5/18/2018</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify other</p>		
<p>4.7</p> <p>Amarillo Pathology Group. Nonpriority Creditor's Name PO Box 50117 Number Street Amarillo TX 79159 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		\$54.55
<p>Last 4 digits of account number <u>3 8 9 7</u></p> <p>When was the debt incurred? <u>2/16/2018-2/16/2018</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify medical bill</p>		
<p>4.8</p> <p>Amarillo Pathology Group. Nonpriority Creditor's Name PO Box 50117 Number Street Amarillo TX 79159 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input checked="" type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>		\$111.55
<p>Last 4 digits of account number <u>6 0 5 6</u></p> <p>When was the debt incurred? <u>2/4/2018-2/4/2018</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify medical bill</p>		

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.9	Amarillo Pathology Group. Nonpriority Creditor's Name PO Box 50117 Number Street Amarillo TX 79159 City State ZIP Code	Last 4 digits of account number <u>4 6 1 3</u> When was the debt incurred? <u>2/21/2017-2/21/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify medical bill	\$71.79
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.10			\$6,597.40
Assertive Realty. Nonpriority Creditor's Name 7420 Golden Pond PI Number Street Amarillo TX 79121 City State ZIP Code			Last 4 digits of account number <u>h A v e</u> When was the debt incurred? <u>8/1/2017-12/1/2017</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Lease
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.11			\$59.35
Atmos Energy. Nonpriority Creditor's Name P.O. Box 650205 Number Street Dallas TX 75265 City State ZIP Code			Last 4 digits of account number <u>3 5 1 8</u> When was the debt incurred? <u>9/14/2018-9/14/2018</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify utility bill
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.12****\$69.15****BritKare Home Medical.**

Nonpriority Creditor's Name

2112 S Coulter St

Number Street

Last 4 digits of account number **6 2 1 2**When was the debt incurred? **6/2/2015-6/2/2015**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.13**\$655.00****Capital One..**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 30285Last 4 digits of account number **7 0 7 9**When was the debt incurred? **12/2015**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Salt Lake City UT 84130
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Credit Card**

4.14**\$253.00****Care Today Urgent Health.**

Nonpriority Creditor's Name

7118 I-40 West Bldg D

Number Street

Last 4 digits of account number **5 6 0 5**When was the debt incurred? **9/22/2017-9/22/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.15

\$428.62**City Of Amarillo.**

Nonpriority Creditor's Name

P.O. Box 100

Number Street

Last 4 digits of account number **5 0 1 1**When was the debt incurred? **6/29/2018-7/31/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79105
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **utility bill**

4.16

\$70.00**Credit Systems International, Inc..**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 1088Last 4 digits of account number **7 1 4 5**When was the debt incurred? **05/2015**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Arlington TX 76004
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Collection Agency**

4.17

\$390.00**Credit Systems International, Inc..**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 1088Last 4 digits of account number **1 5 8 6**When was the debt incurred? **07/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Arlington TX 76004
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Collection Agency**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.18****\$37.00****Credit Systems International, Inc..**

Nonpriority Creditor's Name

Attn: Bankruptcy

Number Street

PO Box 1088Last 4 digits of account number **5 3 8 4**When was the debt incurred? **01/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Arlington TX 76004

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Collection Agency**

4.19**\$1,106.91****David's Bridal.**

Nonpriority Creditor's Name

3140 Soncy Rd

Number Street

Last 4 digits of account number **9 0 2 1**When was the debt incurred? **1/4/2011-1/4/2011**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79124

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **credit card**

4.20**\$155.60****Disney Movies Club.**

Nonpriority Creditor's Name

PO Box 758

Number Street

Last 4 digits of account number **3 6 9 3**When was the debt incurred? **10/29/2015-12/31/1969**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Neenah WI 54957

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.21 **\$15,000.00**

Doyle Moore.
 Nonpriority Creditor's Name
#4 Sutton Place
 Number Street

Last 4 digits of account number 1 1 1 2When was the debt incurred? 8/12/2016-8/12/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

4.22**\$396.76**

First Data.
 Nonpriority Creditor's Name
Po Box 173845
 Number Street

Last 4 digits of account number 5 0 0 0When was the debt incurred? 5/31/2018-5/31/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Denver CO 80217
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

4.23**\$70,000.00**

Indigo Willow Breastmilk Jewelry LLC.
 Nonpriority Creditor's Name
2160 E Fry Blvd
 Number Street

Last 4 digits of account number 9 9 6 CWhen was the debt incurred? 3/12/2018-7/24/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Sierra Vista AZ 85635
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.24****\$1,766.00****Northwest Texas Healthcare System.**

Nonpriority Creditor's Name
1501 Coulter St

Number Street

Last 4 digits of account number **2 7 2 0**When was the debt incurred? **10/10/2017-10/10/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.25**\$37.00****Northwest Texas Healthcare System.**

Nonpriority Creditor's Name
1501 coulter

Number Street

Last 4 digits of account number **S I R S**When was the debt incurred? **10/10/2017-10/10/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.26**\$6,278.00****Northwest Texas Healthcare System.**

Nonpriority Creditor's Name
1501 Coulter

Number Street

Last 4 digits of account number **7 7 6 7**When was the debt incurred? **5/24/2018-5/24/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.27****\$637.60****Northwest Texas Healthcare System.**

Nonpriority Creditor's Name

PO Box 31001

Number Street

Last 4 digits of account number **1 9 9 3**When was the debt incurred? **2/16/2018-2/16/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Pasadena CA 91110

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.28**\$1,378.40****Northwest Texas Healthcare System.**

Nonpriority Creditor's Name

PO Box 31001

Number Street

Last 4 digits of account number **1 0 5 0**When was the debt incurred? **10/10/2017-10/10/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Pasadena CA 91110

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.29**\$421.60****Northwest Texas Healthcare System.**

Nonpriority Creditor's Name

PO Box 31001

Number Street

Last 4 digits of account number **6 1 9 6**When was the debt incurred? **9/19/2017-9/19/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Pasadena CA 91110

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.30

\$764.40**Northwest Texas Healthcare System.**

Nonpriority Creditor's Name

PO Box 31001

Number Street

Last 4 digits of account number **9 0 6 2**When was the debt incurred? **2/4/2018-2/4/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Pasadena CA 91110

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.31

\$276.40**Northwest Texas Healthcare System.**

Nonpriority Creditor's Name

PO Box 31001

Number Street

Last 4 digits of account number **1 3 8 1**When was the debt incurred? **3/2/2018-3/2/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Pasadena CA 91110

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.32

\$5,567.89**PDU Cat.**

Nonpriority Creditor's Name

7920 Stage Hills Blvd

Number Street

Last 4 digits of account number **3 8 7 5**When was the debt incurred? **1/31/2017-3/26/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Bartlett TN 38133

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.33****\$2,007.00****Phoenix Financial Services, Llc..**

Nonpriority Creditor's Name

PO Box 361450

Number Street

Last 4 digits of account number **4 4 1 2**When was the debt incurred? **07/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Indianapolis IN 46236

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Collection Agency**

4.34**\$4,680.00****Pleasant Valley Properties Jan Staton.**

Nonpriority Creditor's Name

4001 Mockingbird Ln

Number Street

Last 4 digits of account number **a r S t**When was the debt incurred? **6/1/2017-9/27/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79109

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

4.35**\$305.28****Progressive Insurance Co.**

Nonpriority Creditor's Name

6300 Wilson Mills Road

Number Street

Last 4 digits of account number **9 1 5 9**When was the debt incurred? **9/12/2018-9/12/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Mayfield Village OH 44143

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.36****\$180.70****Suddenlink.**

Nonpriority Creditor's Name
6710 Hartford ave.

Number Street

Last 4 digits of account number **4 6 0 8**When was the debt incurred? **9/6/2018-10/5/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Lubbock TX 79413
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **utility bill**

4.37**\$645.42****Synchrony Financial.**

Nonpriority Creditor's Name
PO Box 960061

Number Street

Last 4 digits of account number **2 1 6 9**When was the debt incurred? **4/23/2017-4/30/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Orlando FL 32896
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **credit card**

4.38**\$0.00****Target..**

Nonpriority Creditor's Name
Attn: Bankruptcy Dept Target Card Servic

Number Street
PO Box 9475

Last 4 digits of account number **4 2 0 9**When was the debt incurred? **11/2005**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Minneapolis MN 55440
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **Unknown Loan Type**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.39****\$454.37****Texas Tech Physicians of Amarillo.**

Nonpriority Creditor's Name
1400 South Coulter St.

Number Street

Last 4 digits of account number **1 4 2 9**When was the debt incurred? **3/24/2017-7/18/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.40**\$144.21****Texas Tech Physicians of Amarillo.**

Nonpriority Creditor's Name
1400 South Coulter St.

Number Street

Last 4 digits of account number **0 3 8 4**When was the debt incurred? **4/27/2017-4/27/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.41**\$144.21****Texas Tech Physicians of Amarillo.**

Nonpriority Creditor's Name
1400 Coulter St.

Number Street

Last 4 digits of account number **6 7 7 1**When was the debt incurred? **4/27/2017-4/27/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79106
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.42

\$713.00**Town Square Emerg Assoc, PLLC.**

Nonpriority Creditor's Name

PO Box 24432

Number Street

Last 4 digits of account number **3 1 7 2**When was the debt incurred? **3/2/2018-3/2/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Fort Worth TX 76124

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.43

\$713.00**Town Square Emerg Assoc, PLLC.**

Nonpriority Creditor's Name

PO Box 24432

Number Street

Last 4 digits of account number **2 6 2 2**When was the debt incurred? **2/16/2018-2/16/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Fort Worth TX 76124

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.44

\$713.00**Town Square.**

Nonpriority Creditor's Name

PO Box 24432

Number Street

Last 4 digits of account number **6 6 2 9**When was the debt incurred? **11/1/2017-11/1/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Fort Worth TX 76124

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.45****\$1,289.00****Townsquare Emerg Assoc, PLLC.**

Nonpriority Creditor's Name

PO Box 24432

Number Street

Last 4 digits of account number **1 9 5 4**When was the debt incurred? **2/4/2018-2/4/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Fort Worth TX 76124

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.46**\$2,007.00****Townsquare Emerg Assoc, PLLC.**

Nonpriority Creditor's Name

PO Box 24432

Number Street

Last 4 digits of account number **6 2 8 0**When was the debt incurred? **2/21/2017-2/21/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Fort Worth TX 76124

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

4.47**\$1,766.00****Truepartners NW Emergency Assoc.**

Nonpriority Creditor's Name

Po Box 206864

Number Street

Last 4 digits of account number **2 7 2 0**When was the debt incurred? **10/10/2017-10/10/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Dallas TX 75320

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **medical bill**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.48****\$2,715.00****U.S. Department of Education..**

Nonpriority Creditor's Name

ECMC/Bankruptcy

Number Street

PO Box 16408Last 4 digits of account number **9 4 2 8**When was the debt incurred? **03/2015**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **Saint Paul** State **MN** ZIP Code **55116**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

4.49**\$1,544.00****U.S. Department of Education..**

Nonpriority Creditor's Name

ECMC/Bankruptcy

Number Street

PO Box 16408Last 4 digits of account number **9 5 2 8**When was the debt incurred? **03/2015**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **Saint Paul** State **MN** ZIP Code **55116**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

4.50**\$34.19****UPS.**

Nonpriority Creditor's Name

PO Box 1012

Number Street

Last 4 digits of account number **1 8 7 V**When was the debt incurred? **11/18/2017-12/2/2017**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

City **Horsham** State **PA** ZIP Code **19044**

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
other

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$5,186.78****US Department of Education.**

Nonpriority Creditor's Name

PO Box 105028

Number Street

Last 4 digits of account number **0 8 7 2**When was the debt incurred? **3/13/2018-3/13/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Atlanta GA 30348

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

4.51**\$484.08****Wells Fargo Bank.**

Nonpriority Creditor's Name

PO Box 5958

Number Street

Last 4 digits of account number **6 8 6 4**When was the debt incurred? **4/20/2018-4/20/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Portland OR 97208

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

4.52**\$19,467.05****Wells Fargo Dealer Services.**

Nonpriority Creditor's Name

Po Box 3599

Number Street

Last 4 digits of account number **4 4 8 6**When was the debt incurred? **12/6/2016-5/24/2018**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Rancho Cucamonga CA 91729

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **other**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**\$516.69****4.54**

Xcel Energy.
 Nonpriority Creditor's Name
790 S Buchanan St
 Number Street

Last 4 digits of account number 6 6 5 4When was the debt incurred? 3/23/2018-4/6/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79101
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **utility bill**

\$583.32

4.55
Xcel Energy.
 Nonpriority Creditor's Name
790 Buchanan
 Number Street

Last 4 digits of account number 8 9 7 7When was the debt incurred? 8/24/2018-9/7/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Amarillo TX 79101
 City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify **utility bill**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Aargon Agency..	On which entry in Part 1 or Part 2 did you list the original creditor?
Name Attn: Bankruptcy Department Number Street 8668 Spring Mountain Rd	Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Las Vegas NV 89117 City State ZIP Code	Last 4 digits of account number 6 9 8 0
Aargon Agency..	On which entry in Part 1 or Part 2 did you list the original creditor?
Name Attn: Bankruptcy Department Number Street 8668 Spring Mountain Rd	Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Las Vegas NV 89117 City State ZIP Code	Last 4 digits of account number 0 5 2 0
Aargon Collection Agency.	On which entry in Part 1 or Part 2 did you list the original creditor?
Name 8668 Spring Mountain Rd. Number Street	Line 4.26 of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Las Vegas NV 89117 City State ZIP Code	Last 4 digits of account number — — — —
Amarillo National Bank..	On which entry in Part 1 or Part 2 did you list the original creditor?
Name Attn: Bankruptcy Number Street PO Box 1	Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Amarillo TX 79105 City State ZIP Code	Last 4 digits of account number 1 2 1 6
Amarillo National Bank..	On which entry in Part 1 or Part 2 did you list the original creditor?
Name Attn: Bankruptcy Number Street PO Box 1	Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Amarillo TX 79105 City State ZIP Code	Last 4 digits of account number 0 8 0 8

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**Amarillo National Bank..** On which entry in Part 1 or Part 2 did you list the original creditor?

Name
Attn: Bankruptcy
 Number Street
PO Box 1

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Note Loan Part 2: Creditors with Nonpriority Unsecured Claims

Amarillo TX **79105** Last 4 digits of account number **0 7 3 5**
 City State ZIP Code

Cac Financial Corp.. On which entry in Part 1 or Part 2 did you list the original creditor?

Name
2601 NW Expressway
 Number Street
Suite 1000 East

Line **4.47** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Oklahoma City OK **73112** Last 4 digits of account number _____
 City State ZIP Code

CAC Financial Corp.. On which entry in Part 1 or Part 2 did you list the original creditor?

Name
2601 Northwest Expressway
 Number Street
Suite 1000E

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Collection Agency Part 2: Creditors with Nonpriority Unsecured Claims

Oklahoma City OK **73112** Last 4 digits of account number **7 2 9 5**
 City State ZIP Code

Caine & Weiner. On which entry in Part 1 or Part 2 did you list the original creditor?

Name
12005 Ford Road
 Number Street

Line **4.35** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Dallas TX **75234** Last 4 digits of account number _____
 City State ZIP Code

Citibank/Best Buy.. On which entry in Part 1 or Part 2 did you list the original creditor?

Name
Attn: Recovery/Centralized Bankruptcy
 Number Street
PO Box 790034

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Charge Account Part 2: Creditors with Nonpriority Unsecured Claims

St Louis MO **63179** Last 4 digits of account number **2 6 0 9**
 City State ZIP Code

Contract Callers Inc. On which entry in Part 1 or Part 2 did you list the original creditor?

Name
501 Greene St. Suite 302
 Number Street

Line **4.11** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Augusta GA **30901** Last 4 digits of account number _____
 City State ZIP Code

Debtor 1 Michael Adam Wagner
 Debtor 2 Elise Rose Wagner

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page

FedLoan Servicing..

Name _____

Attn: Bankruptcy

Number Street _____

PO Box 69184

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Government Unsecured Part 2: Creditors with Nonpriority Unsecured Claims
Guarantee Loan

Harrisburg PA 17106
 City State ZIP Code

Last 4 digits of account number 0 0 0 1

Hunter Warfield.

Name _____

4620 Woodland Corporate Blvd

Number Street _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Tampa FL 33614
 City State ZIP Code

Last 4 digits of account number

IRS

Name _____

Centralized Insolvency Operation

Number Street _____

PO Box 21126

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Philadelphia PA 19114-0326
 City State ZIP Code

Last 4 digits of account number 9 5 6 9

Medical Data Systems (MDS)..

Name _____

Attn: Bankruptcy Dept

Number Street _____

2001 9th Ave Ste 312

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Collection Attorney Part 2: Creditors with Nonpriority Unsecured Claims

Vero Beach FL 32960
 City State ZIP Code

Last 4 digits of account number 6 1 9 6

Medical Data Systems (MDS)..

Name _____

Attn: Bankruptcy Dept

Number Street _____

2001 9th Ave Ste 312

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Collection Attorney Part 2: Creditors with Nonpriority Unsecured Claims

Vero Beach FL 32960
 City State ZIP Code

Last 4 digits of account number 1 0 5 0

Medical Revenue Service.

Name _____

PO Box 1149

Number Street _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Sebring FL 33871
 City State ZIP Code

Last 4 digits of account number

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**Midland Funding.**

Name
2365 Northside Dr
 Number Street
Ste 300

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Factoring Company
Account Part 2: Creditors with Nonpriority Unsecured Claims

San Diego CA **92108**
 City State ZIP Code

Last 4 digits of account number **7 4 0 7****Navient..**

Name
Attn: Bankruptcy
 Number Street
PO Box 9000

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Educational Part 2: Creditors with Nonpriority Unsecured Claims

Wiles-Barr PA **18773**
 City State ZIP Code

Last 4 digits of account number **0 9 0 2****Ninomiya Law, PLLC.**

Name
Kent Ninomiya
 Number Street
Po Box 3141

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.23** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Cedar Park TX **78630**
 City State ZIP Code

Last 4 digits of account number **9 9 6 C****Okinus, Inc..**

Name
Attn: Bankruptcy
 Number Street
PO Box 691

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Unknown Loan Type Part 2: Creditors with Nonpriority Unsecured Claims

Pelham GA **31779**
 City State ZIP Code

Last 4 digits of account number **8 6 4 8****Rainey & Mayfield LLP.**

Name
330 South Polk St. suite 600
 Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.10** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Amarillo TX **79101**
 City State ZIP Code

Last 4 digits of account number **_____****Scarlet Ibis Radiology services, PLLC.**

Name
PO Box 8500
 Number Street
Lockbox 781926

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.25** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Philadelphia PA **19178**
 City State ZIP Code

Last 4 digits of account number **_____**

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**Schumacher Clinical Partners.** On which entry in Part 1 or Part 2 did you list the original creditor?

Name **165 Caprice Court Unit B**
 Number Street _____

Line 4.46 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Castle Rock **CO** **80109** Last 4 digits of account number _____
 City State ZIP Code _____

Student Loan Department. On which entry in Part 1 or Part 2 did you list the original creditor?

Name **PO Box 66080**
 Number Street _____

Line 4.51 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Tucson **AZ** **85728** Last 4 digits of account number _____
 City State ZIP Code _____

Synccb/ccdstr.. On which entry in Part 1 or Part 2 did you list the original creditor?

Name **Attn: Bankruptcy**
 Number Street **PO Box 965060**

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Charge Account Part 2: Creditors with Nonpriority Unsecured Claims

Orlando **FL** **32896** Last 4 digits of account number 2 1 6 9
 City State ZIP Code _____

Truepartners NW Emergency Assoc. On which entry in Part 1 or Part 2 did you list the original creditor?

Name **Po Box 206864**
 Number Street _____

Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Dallas **TX** **75320** Last 4 digits of account number _____
 City State ZIP Code _____

Wells Fargo Dealer Services. On which entry in Part 1 or Part 2 did you list the original creditor?

Name **Attn: Bankruptcy**
 Number Street **PO Box 19657**

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Automobile Part 2: Creditors with Nonpriority Unsecured Claims

Irvine **CA** **92623** Last 4 digits of account number 8 2 0 6
 City State ZIP Code _____

Wells Fargo Dealer Services.. On which entry in Part 1 or Part 2 did you list the original creditor?

Name **Attn: Bankruptcy**
 Number Street **PO Box 19657**

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
Automobile Part 2: Creditors with Nonpriority Unsecured Claims

Irvine **CA** **92623** Last 4 digits of account number 4 4 8 6
 City State ZIP Code _____

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
Total claims from Part 1	
6a. Domestic support obligations	6a. <u>\$4,081.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$5,757.91</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	6d. <u>\$9,838.91</u>

	Total claim
Total claims from Part 2	
6f. Student loans	6f. <u>\$9,445.78</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$253.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$171,935.44</u>
6j. Total. Add lines 6f through 6i.	6j. <u>\$181,634.22</u>

Fill in this information to identify your case:

Debtor 1	<u>Michael</u>	<u>Adam</u>	<u>Wagner</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Elise</u>	<u>Rose</u>	<u>Wagner</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Hollis Young</u> Name <u>2611 Orleans Way</u> Number Street	Residential Lease Date Lease Began: 7/21/2018 Date Scheduled to End: 7/31/2019 Contract to be ASSUMED
	<u>Missouri City</u> City	<u>TX</u> State <u>77590</u> ZIP Code

Fill in this information to identify your case:

Debtor 1	<u>Michael</u>	<u>Adam</u>	<u>Wagner</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Elise</u>	<u>Rose</u>	<u>Wagner</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106H**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 No
 Yes

In which community state or territory did you live? Texas Fill in the name and current address of that person.

Elise Rose Wagner

Name of your spouse, former spouse, or legal equivalent

2401 33rd Avenue North

Number Street

Texas City
City

TX
State

77590
ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ➔ 4.	\$5,416.67	\$0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$483.17	\$0.00
5b. Mandatory contributions for retirement plans	5b. \$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c. \$0.00	\$0.00
5d. Required repayments of retirement fund loans	5d. \$0.00	\$0.00
5e. Insurance	5e. \$719.59	\$0.00
5f. Domestic support obligations	5f. \$0.00	\$0.00
5g. Union dues	5g. \$0.00	\$0.00
5h. Other deductions. Specify: Retirement Contributions	5h. + \$0.17	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$1,202.93	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$4,213.74	\$0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm	8a. \$0.00	\$0.00
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		
8b. Interest and dividends	8b. \$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c. \$0.00	\$0.00
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		
8d. Unemployment compensation	8d. \$0.00	\$0.00
8e. Social Security	8e. \$0.00	\$0.00
8f. Other government assistance that you regularly receive		
Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		
Specify: _____	8f. \$0.00	\$0.00
8g. Pension or retirement income	8g. \$0.00	\$0.00
8h. Other monthly income. Specify: _____	8h. + \$0.00	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$0.00	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$4,213.74	+ \$0.00 = \$4,213.74
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + \$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12. \$4,213.74	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No. None.		
<input type="checkbox"/> Yes. Explain:		

Fill in this information to identify your case:

Debtor 1	<u>Michael</u>	<u>Adam</u>	<u>Wagner</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Elise</u>	<u>Rose</u>	<u>Wagner</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF TEXAS</u>		
Case number (if known)			

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J**Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

No. Go to line 2.
 Yes. **Does Debtor 2 live in a separate household?**
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

 No Yes. Fill out this information for each dependent.....**Dependent's relationship to Debtor 1 or Debtor 2****Dependent's age****Does dependent live with you?**

<u>Son</u>	<u>5</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<u>Daughter</u>	<u>3</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<u>Daughter</u>	<u>1</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<u>Daughter</u>	<u>11</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.	4.	<u>\$1,425.00</u>
If not included in line 4:		
4a. Real estate taxes	4a.	
4b. Property, homeowner's, or renter's insurance	4b.	
4c. Home maintenance, repair, and upkeep expenses	4c.	
4d. Homeowner's association or condominium dues	4d.	

Debtor 1	Michael Adam Wagner	Case number (if known)	_____
Debtor 2	Elise Rose Wagner	Your expenses _____	
5. Additional mortgage payments for your residence , such as home equity loans 5. _____			
6. Utilities:			
6a.	Electricity, heat, natural gas	6a.	<u>\$150.00</u>
6b.	Water, sewer, garbage collection	6b.	<u>\$100.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	<u>\$250.00</u>
6d.	Other. Specify: _____	6d.	_____
7. Food and housekeeping supplies 7. <u>\$800.00</u>			
8. Childcare and children's education costs 8. _____			
9. Clothing, laundry, and dry cleaning 9. <u>\$75.00</u>			
10. Personal care products and services 10. <u>\$25.00</u>			
11. Medical and dental expenses 11. <u>\$150.00</u>			
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. <u>\$300.00</u>			
13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. _____			
14. Charitable contributions and religious donations 14. _____			
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	_____
15b.	Health insurance	15b.	_____
15c.	Vehicle insurance	15c.	<u>\$80.00</u>
15d.	Other insurance. Specify: _____	15d.	_____
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. _____			
17. Installment or lease payments:			
17a.	Car payments for Vehicle 1 Car Payment	17a.	<u>\$370.00</u>
17b.	Car payments for Vehicle 2	17b.	_____
17c.	Other. Specify: _____	17c.	_____
17d.	Other. Specify: _____	17d.	_____
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. <u>\$405.00</u>			
Child Support			
19. Other payments you make to support others who do not live with you. Specify: 19. _____			

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

21. Other. Specify: _____

21. + _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.	22a. _____ \$4,130.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. _____ \$4,130.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. _____ \$4,213.74
23b. Copy your monthly expenses from line 22c above.	23b. - _____ \$4,130.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. _____ \$83.74

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:
None.

Fill in this information to identify your case:

Debtor 1	<u>Michael</u>	<u>Adam</u>	<u>Wagner</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Elise</u>	<u>Rose</u>	<u>Wagner</u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<u>\$0.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<u>\$10,231.66</u>
1c. Copy line 63, Total of all property on Schedule A/B.....	<u>\$10,231.66</u>

Part 2: Summarize Your Liabilities

Your liabilities
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	<u>\$5,827.00</u>
-------------------------------------------------------------------------------------------------------------------------	-------------------

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<u>\$9,838.91</u>
-----------------------------------------------------------------------------------------------------	-------------------

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	<u>+ \$181,634.22</u>
--------------------------------------------------------------------------------------------------------	-----------------------

Your total liabilities

\$197,300.13

Part 3: Summarize Your Income and Expenses4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<u>\$4,213.74</u>
-------------------------------------------------------------------	-------------------

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<u>\$4,130.00</u>
-------------------------------------------------------------	-------------------

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$3,657.45

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations. (Copy line 6a.)	\$4,081.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$5,757.91
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$9,445.78
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$253.00
9g. Total. Add lines 9a through 9f.	\$19,537.69

Fill in this information to identify your case:

Debtor 1	<u>Michael</u> First Name	<u>Adam</u> Middle Name	<u>Wagner</u> Last Name
Debtor 2 (Spouse, if filing)	<u>Elise</u> First Name	<u>Rose</u> Middle Name	<u>Wagner</u> Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Michael Adam Wagner
Michael Adam Wagner, Debtor 1

Date 11/09/2018
MM / DD / YYYY

X /s/ Elise Rose Wagner
Elise Rose Wagner, Debtor 2

Date 11/09/2018
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	<u>Michael</u> First Name	<u>Adam</u> Middle Name	<u>Wagner</u> Last Name
Debtor 2 (Spouse, if filing)	<u>Elise</u> First Name	<u>Rose</u> Middle Name	<u>Wagner</u> Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u>4927 Yale St</u> Number Street		From <u>8/21/2017</u>	From _____
		To <u>7/15/2018</u>	To _____
<u>Amarillo</u> <u>TX</u> <u>79109</u> City State ZIP Code		City State ZIP Code	
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
<u>5307 Briar St</u> Number Street		From <u>11/1/2014</u>	From _____
		To <u>8/20/2017</u>	To _____
<u>Amarillo</u> <u>TX</u> <u>79109</u> City State ZIP Code		City State ZIP Code	

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy: (January 1 to December 31, <u>2017</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$20,000.00 (est.)</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$300.00 (est.)</u>
For the last calendar year: (January 1 to December 31, <u>2017</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$70,000.00 (est.)</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$150,000.00 (est.)</u>
For the calendar year before that: (January 1 to December 31, <u>2016</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$57,000.00 (est.)</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$75,000.00 (est.)</u>
	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy: (January 1 to December 31, <u>2017</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<u>\$21,500.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the last calendar year: (January 1 to December 31, <u>2017</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, <u>2016</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.
 Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.
 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's name	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...			
				\$1,110.00	\$6,063.59	<input type="checkbox"/> Mortgage	<input checked="" type="checkbox"/> Car
Cross Pointe Auto 2501 S Georgia St	Past 90 days					<input type="checkbox"/> Credit card	<input type="checkbox"/> Loan repayment
Number Street						<input type="checkbox"/> Suppliers or vendors	<input type="checkbox"/> Other _____
Amarillo City	TX State	79109 ZIP Code					

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

 No Yes. List all payments to an insider.**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments that benefited an insider.**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Case title	Nature of the case	Court or agency	Status of the case
Indigo Willow LLC vs Elise Wagner	Civil Law	251st District Court	<input checked="" type="checkbox"/> Pending
	Status or Disposition: Motion for Summary Judgement Filed	Court Name	<input type="checkbox"/> On appeal
Case number 73996C		Number Street	<input type="checkbox"/> Concluded
		City	State ZIP Code

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

 No. Go to line 11. Yes. Fill in the information below.

Describe the property	Date	Value of the property
All American Storage	5/30/2018	\$5,000.00
Creditor's Name		
4415 S Georgia St		
Number Street		
Amarillo		
City TX 79110		
State ZIP Code		
Explain what happened		
<input checked="" type="checkbox"/> Property was repossessed.		
<input type="checkbox"/> Property was foreclosed.		
<input type="checkbox"/> Property was garnished.		
<input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

		Describe the property	Date	Value of the property
Wells Fargo Dealer Services Creditor's Name		2009 GMC Light Duty Denali v8	5/24/2018	

Po Box 17900
Number Street

Explain what happened

Property was repossessed.
 Property was foreclosed.
 Property was garnished.
 Property was attached, seized, or levied.

Denver **CO** **80217**
City State ZIP Code

		Describe the property	Date	Value of the property
Amarillo National Bank Creditor's Name		2009 Toyota Tundra	9/23/2018	

7304 SW 34th Ave. #3
Number Street

Explain what happened

Property was repossessed.
 Property was foreclosed.
 Property was garnished.
 Property was attached, seized, or levied.

Amarillo **TX** **79109**
City State ZIP Code

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Dennis R. Boren, Attorney Person Who Was Paid			
2100 S. Polk Number Street		Various	\$1,450.00

Amarillo TX 79109
City State ZIP Code

Email or website address _____

Person Who Made the Payment, if Not You _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No
 Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No
 Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No
 Yes. Fill in the details.

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No
 Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Custom Trophies
 Business Name

2628 SW 34th Ave
 Number Street

Describe the nature of the business
Awards and Custom Gifts

Name of accountant or bookkeeper
Rhett Cobb, CPA

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From 8/12/2016 To 1/5/2018

Amarillo TX 79106
 City State ZIP Code

Describe the nature of the business

Precision Flooring
 Business Name

4927 Yale
 Number Street

Name of accountant or bookkeeper
Rhett Cobb, CPA

Employer Identification number
 Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From 1/2015 To 7/2018

Amarillo TX 79109
 City State ZIP Code

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No
 Yes. Fill in the details below.

Debtor 1 Michael Adam Wagner
 Debtor 2 Elise Rose Wagner

Case number (if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Michael Adam Wagner _____

Michael Adam Wagner, Debtor 1

Date 11/09/2018

X /s/ Elise Rose Wagner _____

Elise Rose Wagner, Debtor 2

Date 11/09/2018

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Michael First Name	Adam Middle Name	Wagner Last Name
Debtor 2 (Spouse, if filing)	Elise First Name	Rose Middle Name	Wagner Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known)			<input type="checkbox"/> Check if this is an amended filing

Official Form 108**Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral**What do you intend to do with the property that secures a debt?****Did you claim the property as exempt on Schedule C?**

Creditor's name: **Cross Pointe Auto..**

Surrender the property.
 Retain the property and redeem it.
 Retain the property and enter into a *Reaffirmation Agreement*.
 Retain the property and [explain]:

No
 Yes

Description of property securing debt: **2005 Chevrolet Tahoe (approx. 168,000 miles)**

Surrender the property.
 Retain the property and redeem it.
 Retain the property and enter into a *Reaffirmation Agreement*.
 Retain the property and [explain]:

No
 Yes

Creditor's name: **Wells Fargo Dealer Services.**

Description of property securing debt: **other**

Debtor 1 Michael Adam Wagner
 Debtor 2 Elise Rose Wagner

Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

Lessor's name: Hollis Young

No

Description of leased property: Residential Lease
Date Lease Began: 7/21/2018

Yes

Date Scheduled to End: 7/31/2019

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ Michael Adam Wagner

Michael Adam Wagner, Debtor 1

Date 11/09/2018

MM / DD / YYYY

X /s/ Elise Rose Wagner

Elise Rose Wagner, Debtor 2

Date 11/09/2018

MM / DD / YYYY

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
AMARILLO DIVISION**

In re **Michael Adam Wagner**
Elise Rose Wagner

Case No. _____

Chapter **7** _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$2,915.00
Prior to the filing of this statement I have received.....	\$1,450.00
Balance Due.....	\$1,465.00

2. The source of the compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

11/09/2018

Date

/s/ Dennis R. Boren

*Dennis R. Boren
Dennis R. Boren, Attorney
2100 S. Polk
Amarillo, TX 79109
Phone: (806) 206-8180 / Fax: (806) 214-5943*

Bar No. 02665500

/s/ Michael Adam Wagner

Michael Adam Wagner

/s/ Elise Rose Wagner

Elise Rose Wagner

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
AMARILLO DIVISION

IN RE: **Michael Adam Wagner**
Elise Rose Wagner

CASE NO

CHAPTER **7**

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 11/9/2018

Signature */s/ Michael Adam Wagner*
Michael Adam Wagner

Date 11/9/2018

Signature */s/ Elise Rose Wagner*
Elise Rose Wagner

Fill in this information to identify your case:			
Debtor 1	Michael First Name	Adam Middle Name	Wagner Last Name
Debtor 2 (Spouse, if filing)	Elise First Name	Rose Middle Name	Wagner Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS			
Case number (if known) _____			
Check one box only as directed in this form and in Form 122A-1Supp:			
<input checked="" type="checkbox"/> 1. There is no presumption of abuse.			
<input type="checkbox"/> 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).			
<input type="checkbox"/> 3. The Means Test does not apply now because of qualified military service but it could apply later.			
<input type="checkbox"/> Check if this is an amended filing			

Official Form 122A-1**Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are **equally responsible** for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income**1. What is your marital and filing status? Check one only.**

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

- Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$3,657.45	\$0.00
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$0.00

Debtor 1 **Michael Adam Wagner**
 Debtor 2 **Elise Rose Wagner**

Case number (if known) _____

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse**5. Net income from operating a business, profession, or farm**

	Debtor 1	Debtor 2	
Gross receipts (before all deductions)	\$0.00	\$0.00	
Ordinary and necessary operating expenses	-\$0.00	-\$0.00	
Net monthly income from a business, profession, or farm	\$0.00	\$0.00	\$0.00

6. Net income from rental and other real property

	Debtor 1	Debtor 2	
Gross receipts (before all deductions)	\$0.00	\$0.00	
Ordinary and necessary operating expenses	-\$0.00	-\$0.00	
Net monthly income from rental or other real property	\$0.00	\$0.00	\$0.00

7. Interest, dividends, and royalties**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 

For you..... \$0.00

For your spouse..... \$0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.
\$0.00
\$0.00
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

+ _____ + _____

11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$3,657.45	\$0.00	\$3,657.45
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Total current monthly income

Debtor 1 Michael Adam Wagner
 Debtor 2 Elise Rose Wagner

Case number (if known) _____

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11.....**Copy line 11 here** → 12a. \$3,657.45

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form.

12b. \$43,889.40

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Texas

Fill in the number of people in your household.

6

Fill in the median family income for your state and size of household..... 13. \$98,758.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*.
 Go to Part 3.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*.
 Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Michael Adam Wagner

Michael Adam Wagner, Debtor 1

X /s/ Elise Rose Wagner

Elise Rose Wagner, Debtor 2

Date 11/9/2018

MM / DD / YYYY

Date 11/9/2018

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
AMARILLO DIVISION**

IN RE:

Michael Adam Wagner
Elise Rose Wagner

§
§
§
§ Case No. _____
§
Debtor(s) Chapter 7 _____

**DECLARATION FOR ELECTRONIC FILING OF BANKRUPTCY
PETITION, LISTS, STATEMENTS, AND SCHEDULES**

PART I: DECLARATION OF PETITIONER:

As an individual debtor in this case, or as the individual authorized to act on behalf of the corporation, partnership, or limited liability company seeking bankruptcy relief in this case, I hereby request relief as, or on behalf of, the debtor in accordance with the chapter of title 11, United States Code, specified in the petition to be filed electronically in this case. I have read the information provided in the petition, lists, statements, and schedules to be filed electronically in this case and I HEREBY DECLARE UNDER PENALTY OF PERJURY that the information provided therein, as well as the social security information disclosed in this document, is true and correct. I understand that this Declaration is to be filed with the Bankruptcy Court within five (5) business days after the petition, lists, statements, and schedules have been filed electronically. I understand that a failure to file the signed original of this Declaration will result in the dismissal of my case.

[Only include for Chapter 7 individual petitioners whose debts are primarily consumer debts] --
I am an individual whose debts are primarily consumer debts and who has chosen to file under chapter 7. I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each chapter, and choose to proceed under chapter 7.

[Only include if petitioner is a corporation, partnership or limited liability company] --
I hereby further declare under penalty of perjury that I have been authorized to file the petition, lists, statements, and schedules on behalf of the debtor in this case.

Date: 11/9/2018

/s/ Michael Adam Wagner
Michael Adam Wagner
Debtor
Soc. Sec. No. xxx-xx-9569

/s/ Elise Rose Wagner
Elise Rose Wagner
Joint Debtor
Soc. Sec. No. xxx-xx-1769

PART II: DECLARATION OF ATTORNEY:

I declare UNDER PENALTY OF PERJURY that: (1) I will give the debtor(s) a copy of all documents referenced by Part I herein which are filed with the United States Bankruptcy Court; and (2) I have informed the debtor(s), if an individual with primarily consumer debts, that he or she may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

Date: 11/9/2018

/s/ Dennis R. Boren
Dennis R. Boren, Attorney for Debtor